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Bib Data Sheet

CONFIRMATION NO. 3748

SERIAL NUMBER 10/771,884	FILING DATE 02/04/2004 RULE	CLASS 415	GROUP ART UNIT 3745	ATTORNEY DOCKET NO. 30757/39731
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APPLICANTS

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** CONTINUING DATA *****
 N/A *JSW*

** FOREIGN APPLICATIONS *****
 N/A *JSW*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 05/03/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>JSW</i> Initials	STATE OR COUNTRY CT	SHEETS DRAWING 6	TOTAL CLAIMS 2128	INDEPENDENT CLAIMS 888
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ADDRESS
 026096
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TITLE
 Dual retention vane arm

FILING FEE RECEIVED 1068	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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